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TO:

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Application No. 10/829,107  
Examiner: Swartz, Rodney P.  
In re Application of Jenny Valladeau *et al.*  
Filed: 04/21/2004  
Group Art Unit: 1645  
Attorney Docket No.: SF0695C

Dear Sir/Madam:

Transmitted herewith are:

- Response Transmittal - 1 page
- Extension of Time (1 month) - 1 page IN DUPLICATE
- Response - 7 pages
- Certificate of Fax Transmission - 1 page
- Fax Cover Sheet - 1 page



MICHAEL G. BIRO

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52143\_1.DOC

PHONE: (908) 298-5098

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Attorney Docket No.: SF0695C

Application No.: 10/829,107

Filing Date: April 21, 2004

First Named Inventor: Jenny Valladeau et al.

PTO/SB/87 (08-03)

Approved for use through 07/31/2006. OMB 0851-0031

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<b>TRANSMITTAL FORM</b>  (to be used for all correspondence after initial filing)	Application Number	10/829,107	
	Filing Date	04/21/2004	
	First Named Inventor	Jenny Valladeau et al.	
	Art Unit	1645	
	Examiner Name	Swartz, Rodney P.	
Total Number of Pages in This Submission	12	Attorney Docket Number	SF0695C

ENCLOSURES (Check all that apply)		
<input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input checked="" type="checkbox"/> Amendment/Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input checked="" type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement  <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Reply to Missing Parts/ Incomplete Application <input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers  <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____ <input type="checkbox"/> Landscape Table on CID <input type="checkbox"/> Remarks	<input type="checkbox"/> After Allowance Communication to TC <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below):  Certificate of Fax Transmission - 1 page; Fax Cover Sheet - 1 page
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Printed name	Michael G. Biro, Reg. No. 46,556	
Date	March 31, 2005	Reg. No. 46,556

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PTO/SB/22 (12-04)

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<b>PETITION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a)</b>		Docket Number (optional)
<b>FY 2005</b> (Fees pursuant to the Consolidated Appropriations Act 2005 (H.R. 4818))		SF0695C
Application Number 10/829,107	Filed 04/21/2004	
For Isolated Mammalian Membrane Protein Genes; Related Reagents		
Art Unit 1645	Examiner Swartz, Rodney P.	
This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a reply in the above identified application.		
The requested extension and fee are as follows (check the period desired and enter the appropriate fee below):		
<input checked="" type="checkbox"/> One month (37 CFR 1.17(a)(1))	Fee \$120	\$ 120.00
<input type="checkbox"/> Two months (37 CFR 1.17(a)(2))	\$450	\$ _____
<input type="checkbox"/> Three months (37 CFR 1.17(a)(3))	\$1020	\$ _____
<input type="checkbox"/> Four months (37 CFR 1.17(a)(4))	\$1590	\$ _____
<input type="checkbox"/> Five months (37 CFR 1.17(a)(5))	\$2160	\$ _____
<input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1-27. <input type="checkbox"/> A check in the amount of the fee is enclosed. <input type="checkbox"/> Payment by credit card. Form PTO-2038 is attached. <input type="checkbox"/> The Director has already been authorized to charge fees in this application to a Deposit Account. <input checked="" type="checkbox"/> The Director is hereby authorized to charge any fees which may be required, or credit any overpayment, to Deposit Account Number <u>19-0365</u> I have enclosed a duplicate copy of this sheet.		
<b>WARNING:</b> Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.		
I am the <input type="checkbox"/> applicant/inventor. <input type="checkbox"/> assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed (Form PTO/SB/96). <input checked="" type="checkbox"/> attorney or agent of record. Registration Number <u>46,556</u> <input type="checkbox"/> attorney or agent under 37 CFR 1.34. Registration number if acting under 37 CFR 1.34 _____		
<u>Michael Biro</u> Signature		<u>March 31, 2005</u> Date
<u>Michael G. Biro</u> Typed or printed name		<u>908-298-5098</u> Telephone Number
NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below. <input type="checkbox"/> Total of _____ forms are submitted.		

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<b>FY 2005</b> <small>((Fees pursuant to the Consolidated Appropriations Act 2005 (H.R. 4918))</small>		SF0695C
Application Number <b>10/829,107</b>		Filed <b>04/21/2004</b>
For Isolated Mammalian Membrane Protein Genes; Related Reagents		
Art Unit <b>1645</b>		Examiner Swartz, Rodney P.
This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a reply in the above identified application.		
The requested extension and fee are as follows (check if the period desired and enter the appropriate fee below):		
<input checked="" type="checkbox"/>	One month (37 CFR 1.17(a)(1))	\$ <u>120.00</u>
<input type="checkbox"/>	Two months (37 CFR 1.17(a)(2))	\$ _____
<input type="checkbox"/>	Three months (37 CFR 1.17(a)(3))	\$ _____
<input type="checkbox"/>	Four months (37 CFR 1.17(a)(4))	\$ _____
<input type="checkbox"/>	Five months (37 CFR 1.17(a)(5))	\$ _____
<input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1-27. <input type="checkbox"/> A check in the amount of the fee is enclosed. <input type="checkbox"/> Payment by credit card. Form PTO-2038 is attached. <input type="checkbox"/> The Director has already been authorized to charge fees in this application to a Deposit Account. <input checked="" type="checkbox"/> The Director is hereby authorized to charge any fees which may be required, or credit any overpayment, to Deposit Account Number <u>19-0365</u> I have enclosed a duplicate copy of this sheet.		
<b>WARNING:</b> Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.		
I am the <input type="checkbox"/> applicant/inventor. <input type="checkbox"/> assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed (Form PTO/SB/96). <input checked="" type="checkbox"/> attorney or agent of record. Registration Number <u>46,556</u> <input type="checkbox"/> attorney or agent under 37 CFR 1.34. Registration number if acting under 37 CFR 1.34 _____		
<u>Michael G. Biro</u> Signature		<u>March 31, 2005</u> Date
<u>Michael G. Biro</u> Typed or printed name		<u>908-298-5098</u> Telephone Number
NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below. <input type="checkbox"/> Total of _____ forms are submitted.		

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